



**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES  
DIVISION OF ENVIRONMENTAL HEALTH  
RETAIL FOOD STORE SANITATION  
INSPECTION REPORT**

|                   |                                     |              |                        |                 |  |
|-------------------|-------------------------------------|--------------|------------------------|-----------------|--|
| <b>INSPECTION</b> |                                     | <b>GRADE</b> | <b>INSPECTION DATE</b> |                 | <b>ESTABLISHMENT NAME</b>                            |
| Regular           | <input checked="" type="checkbox"/> | O            | 10/05/2020             |                 | MINAGOE MART   |
| Follow-Up         | <input type="checkbox"/>            |              | <b>TIME IN</b>         | <b>TIME OUT</b> | <b>OWNER/OPERATOR</b>                                |
| Complaint         | <input type="checkbox"/>            |              | 7:15PM                 | 8:35            | YD ENTERPRISES, LLC                                  |
| Investigation     | <input type="checkbox"/>            |              | <b>RATING</b>          |                 | <b>LOCATION</b>                                      |
| Other             | <input type="checkbox"/>            | A            | 200700557              |                 | LOT 2149-47 NEW 164<br>PARENHOLT AVENUE TAMUNIK GUAM |
|                   |                                     |              |                        |                 | <b>ESTABLISHMENT TYPE</b>                            |
|                   |                                     |              |                        |                 | FOOD WAREHOUSE                                       |

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection, or sooner, as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal, a written hearing request must be submitted before the indicated correction date.

| ITEM*                                  | REMARKS   | DEMERIT | CORRECT BY DATE |
|--|---|---------|-----------------|
|  | A regular inspection was conducted on this day.   |         |                 |
|  | The violations were observed on the following items: <input type="checkbox"/> N/A, no violations were observed.           |         |                 |
| <input type="checkbox"/> 1             | Approved source; sound condition; no spoilage   |         |                 |
| <input type="checkbox"/> 3             | Potentially hazardous food meets temperature requirements during storage, preparation, display, service & transportation. |         |                 |
| <input type="checkbox"/> 11            | Personnel with infections restricted.   |         |                 |
| <input type="checkbox"/> 12            | Hands washed and clean; good hygiene practices.   |         |                 |
| <input checked="" type="checkbox"/> 27 | Water: source, safe, hot and cold, under pressure.  |         |                 |
| <input type="checkbox"/> 28            | Sewage & wastewater disposal.   |         |                 |
| <input type="checkbox"/> 30            | Plumbing: no cross-connection, back siphonage, back flow.   |         |                 |
| <input type="checkbox"/> 41            | Only necessary toxic substances, properly labeled, used, stored separately.   |         |                 |
| <input type="checkbox"/> 45            | Sanitary permit, health certificates, and grade placard valid.  |         |                 |
|  |   |         |                 |
|  |   |         |                 |
|  |   |         |                 |
|  |   |         |                 |
|  | "A" Placard No. 03163 Posted.   |         |                 |

I have read and understand the above violation(s) and I am aware of the corrective measures that I must take.

\*Note: When any of the following items are cited above, they shall be corrected within ten (10) days of this inspection:

(1), (3), (11), (12), (27), (28), (30), (41), & (45).

RECEIVED BY (Print & Sign):

DEH INSPECTOR (Print & Sign):

T. SHIMIZU

Kimberly

EPHRE